

KPDES FORM 1

AZ# 4215

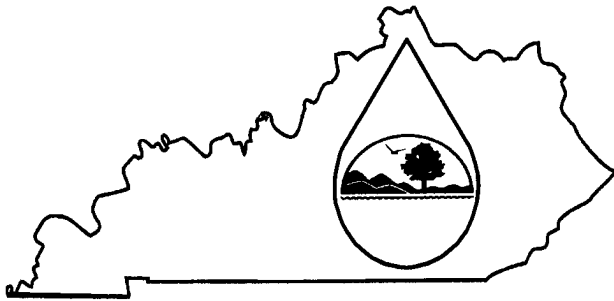
KENTUCKY POLLUTANT DISCHARGE

ELIMINATION SYSTEM

RECEIVED

JUL 30 2009

PERMIT APPLICATION



This is an application to: (check one)

- ☐ Apply for a new permit.
☒ Apply for reissuance of expiring permit.
☐ Apply for a construction permit.
☐ Modify an existing permit.

Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:

Form A, Form B, Form C, Form F, or Form SC

For additional information contact:

KPDES Branch (502) 564-3410

CK 200-

I. FACILITY LOCATION AND CONTACT INFORMATION		AGENCY USE	0	0	9	7	5	7	8
A. Name of Business, Municipality, Company, Etc. Requesting Permit WILLIAMSBURG PLASTICS									
B. Facility Name and Location					C. Primary Mailing Address (all facility correspondence will be sent to this address). Include owner's mailing address (if different) in D.				
Facility Location Name: WILLIAMSBURG PLASTICS					Facility Contact Name and Title: Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> JEFF STEELE, VICE PRESIDENT				
Facility Location Address (i.e. street, road, etc., not P.O. Box): U.S. HIGHWAY 25 W AT AIRPORT ROAD					Mailing Address: 2410 PLANTSIDE DRIVE				
Facility Location City, State, Zip Code: WILLIAMSBURG, KENTUCKY 40769					Mailing City, State, Zip Code: JEFFERSONTOWN, KENTUCKY 40299				
D. Owner's name (if not the same as in part A and C):					Facility Contact Telephone Number: (502) 491-3785				
Owner's Mailing Address:					Owner's Telephone Number (if different):				

II. FACILITY DESCRIPTION

A. Provide a brief description of activities, products, etc: INJECTION MOLDED PLASTIC PARTS AND ASSEMBLY

B. Standard Industrial Classification (SIC) Code and Description

Principal SIC Code & Description:	3089 PLASTIC PARTS, INJECTION MOLDED PLASTICS		
Other SIC Codes:			

III. FACILITY LOCATION

A. Attach a U.S. Geological Survey 7 1/2 minute quadrangle map for the site. (See instructions)	
B. County where facility is located: WHITLEY	City where facility is located (if applicable): WILLIAMSBURG
C. Body of water receiving discharge: WATTS CREEK	
D. Facility Site Latitude (degrees, minutes, seconds): 36° 46' 10"	Facility Site Longitude (degrees, minutes, seconds): 84° 09' 15"
E. Method used to obtain latitude & longitude (see instructions): TOPOGRAPHIC MAP COORDINATES	
F. Facility Dun and Bradstreet Number (DUNS #) (if applicable): 006373633	

IV. OWNER/OPERATOR INFORMATION**A. Type of Ownership:**

☐ Publicly Owned ☒ Privately Owned ☐ State Owned ☐ Both Public and Private Owned ☐ Federally owned

B. Operator Contact Information (See instructions)

Name of Treatment Plant Operator:

N/A

Telephone Number:

Operator Mailing Address (Street):

Operator Mailing Address (City, State, Zip Code):

Is the operator also the owner?

Yes ☐ No ☐

Is the operator certified? If yes, list certification class and number below.

Yes ☐ No ☐

Certification Class:

Certification Number:

V. EXISTING ENVIRONMENTAL PERMITS

Current NPDES Number:

KY0097578

Issue Date of Current Permit:

OCTOBER 1, 2005

Expiration Date of Current Permit:

JANUARY 31, 2010

Number of Times Permit Reissued:

2

Date of Original Permit Issuance:

JUNE 28, 1993

Sludge Disposal Permit Number:

N/A

Kentucky DOW Operational Permit #:

N/A

Kentucky DSMRE Permit Number(s):

N/A

Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	N/A	
Solid or Special Waste	N/A	
Hazardous Waste - Registration or Permit	KYR-000-006-650	

VI. DISCHARGE MONITORING REPORTS (DMRs)

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). Information in this section serves to specifically identify the name and telephone number of the DMR official and the DMR mailing address (if different from the primary mailing address in Section I.C).

A. DMR Official (i.e., the department, office or individual designated as responsible for submitting DMR forms to the Division of Water):

AMEC Earth & Environmental, Inc. c/o Kenny Reutlinger

DMR Official Telephone Number:

(502) 267-0700

B. DMR Mailing Address:

- Address the Division of Water will use to mail DMR forms (if different from mailing address in Section I.C), or
- Contact address if another individual, company, laboratory, etc. completes DMRs for you; e.g., contract laboratory address.

DMR Mailing Name:

AMEC Earth & Environmental, Inc.

DMR Mailing Address:

11003 Bluegrass Parkway, Suite 690

DMR Mailing City, State, Zip Code:

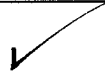
Louisville, Kentucky 40299

VII. APPLICATION FILING FEE

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount (for permit renewals, please include the KPDES permit number on the check to ensure proper crediting). Descriptions of the base fee amounts are given in the "General Instructions."

Facility Fee Category:

NON-PROCESS INDUSTRY



Filing Fee Enclosed:

\$200.00

VIII. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):

Mr. ☒ Ms. ☐ JEFF STEELE, VICE PRESIDENT

SIGNATURE

TELEPHONE NUMBER (area code and number):

(502) 491-3785

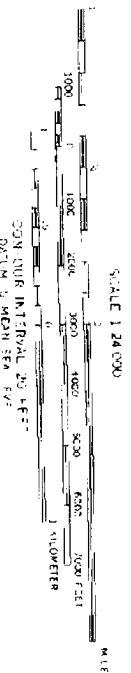
DATE:

07/27/09

Return completed application form and attachments to: **KPDES Branch, DEP Division of Water, 200 Fair Oaks Lane, Fourth Floor, Frankfort, KY 40601. Direct questions to: KPDES Branch at (502) 564-3410.**

Topographic map of the study area. The map shows a river labeled 'CUMBERLAND' and a road labeled 'HUTCHINSON'. A black dot indicates the 'Site Location'.

Geology mapped in 1952-53. Based in part on work by R. P. Briggs, 1954-55.



KENTUCKY

Form 1, Part III A

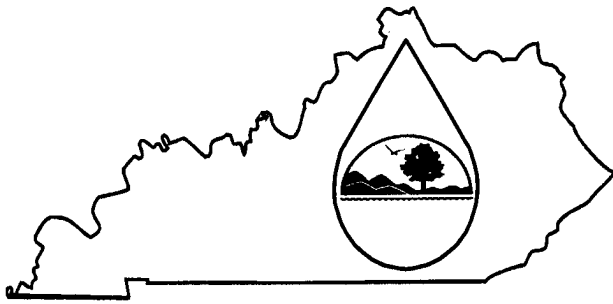
Topographic map of the study area showing the site location. The map includes contour lines, roads, and various elevation points. A box labeled "Site Location" is placed near a road intersection. A large circle is drawn around the site location area. The map is oriented with North at the top.

KPDES FORM F

7I# 4215

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION



A complete application consists of this form and Form 1.
For additional information, Contact KPDES Branch, (502) 564-3410.

I. OUTFALL LOCATION

AGENCY USE

0097578

For each outfall list the latitude and longitude of its location to the nearest 15 seconds and name the receiving water.

A. Outfall Number	B. Latitude			C. Longitude			D. Receiving Water (name)
002	36	45	28	84	09	25	WATTS CREEK
006	36	45	22	84	09	29	WATTS CREEK

II. IMPROVEMENTS

A. Are you now required by any federal, state, or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

1. Identification of Conditions, Agreements, Etc.	2. Affected Outfalls		3. Brief Description of Project	4. Final Compliance Date	
	No.	Source of Discharge		a. req.	b. proj.
N/A					

B. You may attach additional sheets describing any additional water pollution (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

III. SITE DRAINAGE MAP

Attach a site map showing topography (or indicating the outline of drainage areas served by the outfall(s) covered in the application if a topographic map is unavailable) depicting the facility including: each of its intake and discharge structures; the drainage area of each storm water outfall; paved areas and buildings within the drainage area of each storm water outfall, each known past or present areas used for outdoor storage or disposal of significant materials, each existing structural control measure to reduce pollutants in storm water runoff, materials loading and access areas, areas where pesticides, herbicides, soil conditioners and fertilizers are applied; each of its hazardous waste treatment, storage or disposal units (including each area not required to have a RCRA permit which is used for accumulating hazardous waste under 40 CFR 262.34); each well where fluids from the facility are injected underground; springs, and other surface water bodies which receive storm water discharges from the facility.

IV. NARRATIVE DESCRIPTION OF POLLUTANT SOURCES

A. For each outfall, provide an estimate of the area (include units) of impervious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.

Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
2	50,625 sq. ft.	50,625 sq. ft.	7	8,150 sq. ft.	96,820 sq. ft.

B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed to minimize contact by these materials with storm water runoff; materials loading and access areas; and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

This facility was put into production during the month of September 1992. In 1987, this facility was used as an American Greetings Company warehouse. Finished goods and some small containers of raw material are shipped and received at a dock located on the southeast corner of the plant at the Outfall 2 area. Bulk tankers of plastic pellets are off-loaded at the northwest corner of the garage near the bulk silo area in the Outfall 7 area. No pesticides, herbicides, or fertilizers are used on the grassy areas.

C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in storm water runoff; and a description of the treatment the storm water receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.

Outfall Number	Treatment	List Codes from Table F-1
	See Attached Sheet	

V. NON-STORM WATER DISCHARGES

A. I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of non-storm water discharges, and that all non-storm water discharges from these outfall(s) are identified in either an accompanying Form C or Form SC application for the outfall.

Name and Official Title (type or print)	Signature	Date Signed
MR. JEFF STEELE, VICE PRESIDENT		

B. Provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.

Based on visual inspections at the plant conducted at various times by Mr. Willie Singleton, Maintenance

VI. SIGNIFICANT LEAKS OR SPILLS

Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.

NONE

VII. DISCHARGE INFORMATION

A,B,C, & D: See instructions before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided. Tables F-1, F-2, and F-3 are included on separate pages.

Williamsburg Plastics, Williamsburg, Kentucky 40769

KPDES Permit Renewal Application

FORM F: Item IV-C

Former Outfall #1 has a drainage ditch parallel to Williamsburg Plastics Road, which curves through the area adjacent to U.S. Highway 25 W. The shoulder of U.S. Highway 25 W is at a higher elevation and slopes toward the plant. This outfall was previously permitted due to discharge of non-contact cooling water from an outdoor heat exchanger. However, the discharge was connected to the sanitary sewer, and this outfall was removed from the permit following the renewal in 2005.

Outfall #2 consists of an asphalt parking lot which is graded toward the Louisville and Nashville Railroad right-of-way.

Former Outfall #3 consists of the storm water run-off from the northern half of the plant's roof. This storm water is conveyed underground via a pipe to a discharge point near the sampling point for Outfall #2. As no pollutants are believed to be deposited on the roof, this outfall was removed from the permit prior to the 2005 renewal.

Former Outfalls #4 and #5 consist of the roof run-off from the northern half of the plant's roof. The roof downspouts discharge to a concrete channel with the outlet near the end of the rail siding. As no pollutants are believed to be deposited on the roof, these outfalls were removed from the permit prior to the 2005 renewal.

Outfalls #6 and #7 consist of drainage from the southwest portions of the facility, including a small garage and an unloading area for plastic pellets into storage silos. Outfall #7 now actually discharges into drainage basin #6, and then is discharged through Outfall #6.

Structural control measures for each of the current sampling points include nylon mesh netting, to prevent solids (i.e. plastic pellets) from entering the storm water runoff, and rip-rap to trap other solids by reducing the flow velocity and preventing erosion of the channel through which the discharge flows. Collected solids are either recycled or disposed of in solid waste containers. Significant volumes of sediment would be redistributed on the grassy portions of the property. The discharge points are visually observed at least once per quarter when the sampling occurs, and annually during the Comprehensive Site Compliance Evaluation. Modifications to maintain the control measures are performed on an as-needed basis.

E: Potential discharges not covered by analysis - is any toxic pollutant listed in Table F-2, F-3, or F-4, a substance which you currently use or manufacture as an intermediate or final product or by product.

☐ Yes (list all such pollutants below)

☒ No (go to Section IX)

VIII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ Yes (list all such results below)

☒ No (go to Section IX)

IX. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in item VII performed by a contract laboratory or consulting firm?

☒ Yes (list the name, address and telephone number of, and pollutants analyzed by each such laboratory or firm below; use additional sheets if necessary).

☐ No (go to Section IX)

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed
TEST AMERICA, INC.	2960 FOSTER CREIGHTON DRIVE, NASHVILLE, TENNESSEE	(800) 765-0980	REQUIRED PARAMETERS, as indicated in Section VII, Part A.

X. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations.

NAME & OFFICIAL TITLE (type or print)	AREA CODE AND PHONE NO.
Mr. <input checked="" type="checkbox"/> Ms. <input type="checkbox"/> JEFF STEELE, VICE PRESIDENT	(502) 491-3785
SIGNATURE	DATE SIGNED

OUTFALL NO: 002

Pollutant and CAS Number (if available)	Maximum Values (include units)		Average Values (include units)		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During 1 st 20 Minutes	Flow-weighted Composite	Grab Sample Taken During 1 st 20 Minutes	Flow-weighted Composite		
Oil and Grease	< 5.38 mg/L		< 5.38 mg/L		1	
Biological Oxygen Demand BOD ₅	4.92 mg/L		4.92 mg/L		1	
Chemical Oxygen Demand (COD)	57.9 mg/L		57.9 mg/L		1	
Total Suspended Solids (TSS)	249 mg/L		249 mg/L		1	
Total Kjeldahl Nitrogen	0.287 mg/L		0.287 mg/L		1	
Nitrate plus Nitrite Nitrogen	0.109 mg/L		0.109 mg/L		1	
Total Phosphorus	0.234 mg/L		0.234 mg/L		1	
pH	7.00 SU (Min)		7.00 SU (Min)		1	

[illegible]

Part C - List each pollutant shown in Tables F-2, F-3, and F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

[illegible]

Part D - Provide data for the storm event(s) which resulted in the maximum values for the flow-weighted composite sample.

1. Date of Storm Event	2. Duration of Storm Event (in minutes)	3. Total rainfall during storm event (in inches)	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event (gal/min or specify units)	6. Total flow from rain event (gallons or specify units)
6/11/09	1260 (note – storm event actually started the evening of June 10 th)	2.49 (note – storm event actually started the evening of June 10 th)	137	This was not possible to calculate due to the backwash from flooding.	~279,894 gallons

7. Provide a description of the method of flow measurement or estimate.

The measured rainfall event (in feet) was multiplied by the drainage area (sq. feet) to calculate the flow for the drainage basin.

OUTFALL NO: 006

Pollutant and CAS Number (if available)	Maximum Values (include units)		Average Values (include units)		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During 1 st 20 Minutes	Flow-weighted Composite	Grab Sample Taken During 1 st 20 Minutes	Flow-weighted Composite		
Oil and Grease	< 6.02 mg/L		< 6.02 mg/L		1	
Biological Oxygen Demand BOD ₅	2.08 mg/L		2.08 mg/L		1	
Chemical Oxygen Demand (COD)	18.0 mg/L		18.0 mg/L		1	
Total Suspended Solids (TSS)	228 mg/L		228 mg/L		1	
Total Kjeldahl Nitrogen	0.833 mg/L		0.833 mg/L		1	
Nitrate plus Nitrite Nitrogen	0.175 mg/L		0.175 mg/L		1	
Total Phosphorus	0.178 mg/L		0.178 mg/L		1	
pH	7.60 SU (Min)		7.60 SU (Min)		1	

[illegible]

Part C - List each pollutant shown in Tables F-2, F-3, and F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

[illegible]

Part D - Provide data for the storm event(s) which resulted in the maximum values for the flow-weighted composite sample.

1. Date of Storm Event	2. Duration of Storm Event (in minutes)	3. Total rainfall during storm event (in inches)	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event (gal/min or specify units)	6. Total flow from rain event (gallons or specify units)
6/11/09	1260	2.49	137	This was not possible to calculate due to the backwash from flooding.	~93,000 gallons

7. Provide a description of the method of flow measurement or estimate.

The measured rainfall event (in feet) was multiplied by the drainage area (sq. feet) to calculate the flow for the drainage basin.

